UN HABITAT
FOR A BETTER URBAN FUTURE

COVID-19 in African cities

Impacts, Responses and Policies Recommendations

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United Nations Economic Commission for Africa

UCLG AFRICA
United Cities and Local Governments of Africa
Cités et Gouvernements Locaux Unis d'Afrique
CGLU AFRIQUE

UNCDF
Unlocking Public and Private Finance for the Poor

SHELTER AFRIQUE
Financing Affordable Housing for Africa

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CONTRIBUTORS

Supervision : Oumar Sylla, Edlam Abera Yemeru, Jean Pierre Elong Mbassi

Contributors: Claude Ngomsi, François Yatta, Dmitry Pozhidaev, Lucia Kiwala, Robert Ndugwa, Donatien Beguy, Dennis Mwaniki, Christophe Lalande, Gianluca Crispi, Marco Kamiya, Muhammad Gambo, Marios Pournaris, Jack Zulu, Yohannes Ghebru

Editor: Dr. Joseph Maseland

Reviewers: Reviewers: Xing Quan Zhang, Lucia Kiwala, Benedict Arimah, Omoayena Odunbaku

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Layout: Michael Lusaba

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Executive Summary

COVID-19, a global pandemic declared by the World Health Organization (WHO), is crippling the global economy and upending people's lives thereby threatening sustainable development across all its dimensions. Africa is also facing the dire consequences of the crisis, necessitating timely responses, recovery and rebuilding policies and strategies. Globally, urban areas are the epicentres of the epidemic accounting for the vast majority of the confirmed COVID-19 cases. This report looks at the impacts, responses and policy pathways related to COVID-19 in the context of cities in Africa.

Africa is currently experiencing the most rapid urban growth in the world. The urban population increased more than 10 times in six decades, from 53 million to 588 million during the period from 1960 to 2020.[1] African cities are epidemiological foci of for COVID-19 like other urban areas globally. However, the quality and nature of Africa's urbanization exacerbates transmission rates of infectious diseases like COVID-19 and makes containment and response measures considerably more difficult.

The COVID-19 risk factors are acute in African cities in part due to the largely unplanned and poorly managed urbanization process resulting in widespread informal settlements and severe infrastructure and service deficits. In 2019, about 47% of Africa's urban population lived in slums or informal settlements, which translates into about 257 million people across the whole of Africa. Only 55% and 47% of Africa's urban residents have access to basic sanitation services and hand washing facilities respectively. Furthermore, most urban residents rely on the informal sector that employs 71% of Africans, making them highly vulnerable to loss of income and unable to abide by restrictions and lockdown measures. African cities often have high population densities coupled with overcrowded public transport and marketplaces making social distancing almost impossible. These factors combined make Africa's cities hotbeds for COVID-19.

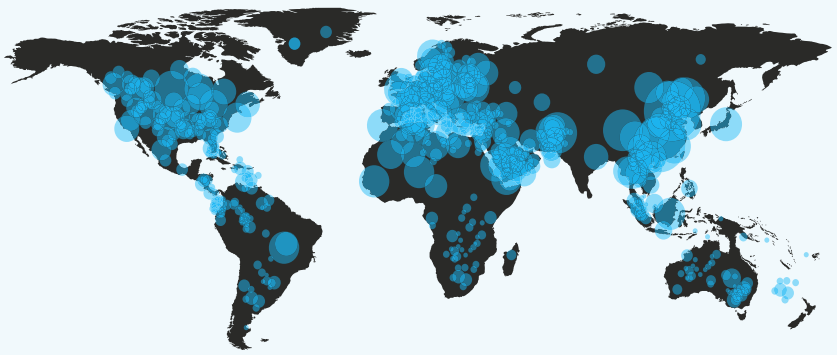
COVID-19 has registered adverse impacts in cities in multiple ways. With Africa having low ratios of health professionals and hospital beds and most of its stock of pharmaceuticals being imported, health systems are highly constrained in their response to COVID-19. Inhabitants of slums and informal settlements face heightened challenges in accessing healthcare services and products. From an economic perspective, urban based enterprises and sectors have undergone drastic reductions and closures especially SMEs which have a constrained ability to absorb shocks.. Widespread loss of employment income has been registered with informal sector workers being especially vulnerable.

Other challenges include elevated risks of eviction and homelessness, food insecurity and information inequalities especially among women. As first responders in tacking the urban impacts of COVID-19, local authorities are key actors in taking measures to tackle the crisis, yet many face capacity constraints including a loss of up to 60% of their revenues.

To promptly and adequately address the challenges of COVID-19 pandemic in Africa at the urban scale and through local governments, six key responses are recommended for short, medium and long term interventions led by national and local governments with the support of the African Union, United Nations System and Regional Economic Communities (RECs)1. Apply local communication and community engagement strategies 2. Support SMEs and the informal economy 3. Deepen decentralized responses to COVID-19 through strengthening local government capacities 4. Target informal settlements through data driven contextualized measures 5. Establish mechanisms to promote rapid access to housing and prevent forced evictions 6. Integrate urban planning and management as key priorities for recovery and rebuilding strategies towards long-term resilience.

1 World Urbanization Prospects: The 2018 Revision, in https://population.un.org/wup/

Introduction



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The world is facing an unprecedented health crisis due to the spread of COVID-19. So far, the world has recorded over seven million confirmed cases and over 400,000 fatalities.[2] In just a few months, the pandemic has dramatically transformed the way people live, work, shop and socialize globally. Urban areas are the epicentres of the epidemic and over 95% of the confirmed COVID-19 cases are in urban areas.[3]

2 Johns Hopkins University Center for Systems Science Engineering (2020) COVID-19 Dashboard; https://coronavirus.jhu.edu/map.html

3 UN-Habitat (2020) UN-Habitat COVID-19 Response Plan; https://unhabitat.org/sites/default/files/2020/04/final_un-habitat_covid-19_response_plan.pdf

COVID-19 has produced adverse impacts at an unprecedented scale and the pandemic is likely to set off a historic global economic recession. So far, the measures taken worldwide to contain the spread of COVID-19 have affected the global value chains of manufacturing, transportation, retailing and consumption. According to the International Monetary Fund (IMF), the anticipated recession of 'The Great Lockdown of 2020' is estimated at -3% compared to -0.1% during the global financial crisis of 2009.[4] According to the International Labour Organization (ILO), an estimated 1.6 billion people employed in the informal economy - or nearly half the global workforce - could see their livelihoods destroyed due to the decline in working hours brought on by lockdowns and curfews aimed at curbing the spread of COVID-19.

In Africa, where 163,699 positive cases were recorded as of 31 May 2020,[5] the United Nations Economic Commission for Africa (UNECA) estimated considerable economic damage, social costs and compromised overall well-being. The average GDP growth in Africa in 2020 is expected to fall from 3.2% to 1.8% but may contract even further.

4 IMF (2020) World Economic Outlook (Chapter 1 The Great Economic Lockdown); https://www.imf.org/~/media/Files/Publications/WEO/2020/April/English/text.ashx?la=en

5 Africa CDC Dashboard, http://africacdc.org/covid-19/

The informal sector which employs

71%

of Africans could face dire consequences, with up to 25 million people possibly falling into extreme poverty.

Major economic sectors had already been adversely affected with the global fall in oil prices which accounts for 40% of region's exports. The informal sector which employs 71% of Africans could face dire consequences, with up to 25 million people possibly falling into extreme poverty. As elsewhere, urban areas in Africa are the main hotspots for the spread of COVID-19 and therefore require specific focus as the region defines and implements a continental response to the crisis.

Estimates show that about 47% of Africa's urban population live in slums or informal settlements in 2019, which translates into about 257 million urban residents living in slums or slum-like conditions across the whole of Africa (Figure 3). Such conditions contribute to accelerating COVID-19 transmission and present major challenges for response measures. The United Nations socio-economic framework for the immediate response to COVID-19 considers the urban informal sector and the self-employed as among the 'at risk' population groups experiencing a high degree of socio-economic marginalization. This is also the view of the Regional Risk Communication and Communication Engagement working group (RCCE). [6]

This inter-agency coordination platform on risk communication and community engagement stated that the population most at risk are those who depend heavily on the informal economy, occupy areas prone to shocks, have inadequate access to social services or political influence, have limited capacities and opportunities to cope and adapt with inadequate or no access to technologies. Migrants are also part of this group and, according to the United Nations Capital Development Fund (UNCDF),[7] the flow of global remittances to low- and middle-income countries may fall by about one fifth in 2020.

So far, different measures have been taken by national, sub-national and local governments to contain the epidemic and to address its impacts on vulnerable groups and on national economies. Their implementation involved the development of technical partnerships, including the private sector and civil society. After close to two months of implementing COVID-19 responses, some countries among those that imposed a partial or full lockdown and restrictions on movements have announced measures to reopen their economies. UNECA[8] is advocating for an effective COVID-19 lockdown exit strategy to mitigate the risks and protect vulnerable people.

6 RCCE (2020) COVID-19: How to include marginalized and vulnerable people in risk communication and community engagement; https://reliefweb.int/sites/reliefweb.int/files/resources/COVID-19_CommunityEngagement_130320.pdf

7 UNCDF (2020) COVID-19 changing the landscape for migrants and remittances; https://www.uncdf.org/article/5606/covid-19-changing-the-landscape-for-migrants-and-remittances

8 UNECA (2020) COVID-19: Lockdown exit strategies for Africa

© UNHabitat/Kirsten Milhahn

The pandemic is an opportunity for a new generation of multilateralism based on the subsidiarity principle and for effective decentralization to ensure that attention to the needs of citizens is incorporated in all governance mechanisms and levels. At the country level, UN Country Teams are working with donors to build partnerships with national and local governments, as well as communities and the private sector to ensure that the SDGs remain on track and that no one is left behind at the country or local level while addressing the COVID-19.

Conscious of the importance of synergy of actions, the UN Secretary-General, António Guterres, has asked the international community to focus on three critical areas of action: 1) Tackling the health emergency; 2) Addressing the social impact of the pandemic, the economic response and recovery; and 3) 'Recovering better'.

African capital cities have proven to be the main entry points and epicentres of COVID-19 and they are now the hubs for the conception, implementation and monitoring of COVID-19 responses. The COVID-19 pandemic has shown that African Governments need to revisit their urbanization perspectives and highlight the factors and actions that will make their cities more resilient to future shocks and crises. To do so, they need to embark on interventions that improve the planning and implementation of existing policies with local authorities as their key partners, and recognize the strategic role of community engagement in addressing and reducing the pervasive urban, social and spatial inequalities.

This report reviews the key impacts of COVID-19 on African cities as well as the response measures taken so far to identify innovative practices, solutions and opportunities to inform and improve current and future recovery and rebuilding strategies. In doing so, it draws on the call by the United Nations for the scaling up of international solidarity and political commitment to ensure that people everywhere have access to essential services and social protection. This is important to strengthen multi-sectoral and multi-dimensional international cooperation in supporting the region and its country responses but, more importantly, to advance post-pandemic socio-economic recovery and resilience.

1. African urbanization: A huge risk factor of COVID-19

The confirmed COVID 19 cases in Africa have reached the number of 163599 on the 31 of May 2020.[9] The number of confirmed cases increased by 2,038% with the disease spreading from airports to the major cities and then to secondary and third-tier cities. Subsequently, COVID-19 in Africa, especially in its initial phases, is mostly a city-based disease. The quality and nature of Africa's urbanization presents specific challenges for addressing the pandemic. The type of urbanization in Africa both exacerbates transmission rates of infectious diseases like COVID-19, and makes containment and response measures difficult. Some of the key factors for this include the pace and extent of planning of urbanization, the dominance of informal settlements, the basic services and infrastructure deficits, the persistence of informal employment, among others. This section highlights these elements briefly given the implications for Africa's response, recovery and rebuilding strategies.

1.1. Rapid and unplanned urbanization

While Africa is still the least urbanized continent, it is urbanizing very rapidly. UN population projections show that, in 2020, 44% of Africa's total population lives in areas defined as urban, compared to only 19% in 1960.[10] This translates suggests a 10-fold increase, from 53 million urban residents in 1960 to 588 million in 2020. It is projected that the number of Africa's urban residents will increase to 1.5 billion by 2050 and that Africa will pass the tipping point of 50% urban population around 2035. Small- and medium-sized cities are the fastest growing ones and concentrate most of the urban population in Africa. In 2018, only 221 African cities' populations exceeded 300,000, while more than 10,000 cities and towns had less than 300,000 inhabitants. These towns face pronounced urban planning and management capacity challenges which may also constrain COVID-19 responses.

Africa will pass the tipping point of

50%

urban population around **2035**

Historically, urbanization has been a transformative force of change and is closely associated with structural transformation, innovation, economic growth and improved well-being. Cities enable the expansion of the productive sectors of the economy which is key in driving growth and decent job creation. However, with inadequate urban planning and management, and where severe infrastructure and service deficits prevail with limited productive job opportunities and inadequate housing, urbanization can pose as risk factor. COVID-19 has vividly revealed that the characteristics of African urbanization have exacerbated the vulnerability of cities to the pandemic's impacts, as many of these stem from systemic shortfalls in urban planning and management.

9 Word Health Organization (WHO)

10 UNDESA, 2018

One of the revealing trends regarding the state of urban planning in Africa is the low number of urban planning experts available in the region. According to UN-Habitat and the African Planners Association,[11] countries such as Mauritius, Nigeria, South Africa and Zimbabwe have relatively high numbers of registered planners per 100,000 inhabitants if compared with Burkina Faso, Malawi and Uganda. However, in comparison with Australia, the United Kingdom and the United States of America, the ratios of registered planners per 100,000 are very low. This has implications for the extent to which urban growth is planned in advance and fosters chaotic and unplanned development. Beyond the expertise, and even where urban planning policies and regulations are in place, poor enforcement is also a key challenge.

A further key challenge is that of gaps in financing the investments needed in Africa's rapidly growing cities. As much as USD 93 billion (about one-third of which is for maintenance) is required annually to finance the urban transition in Africa, but this amount has an estimated 40% financing gap.[12] Cities lack sufficient autonomy to mobilize and use revenues or incur long-term debt to support their development. Cities and local governments are not financially equipped to respond to people's needs and to provide better living conditions for all. In addition, they now face the added burden of responding to contain the COVID-19 pandemic.

Moreover, African local authorities and city managers usually lack the tools and capacities to handle equitable delivery of quality services or the means to effectively intervene in various crisis situations. While they may have the mandate to lead immediate responses, this is typically not accompanied by adequate financial, technological and human resources or institutional and regulatory frameworks. This poses serious challenges in the context of the current COVID-19 and any future infectious epidemics or external crises.

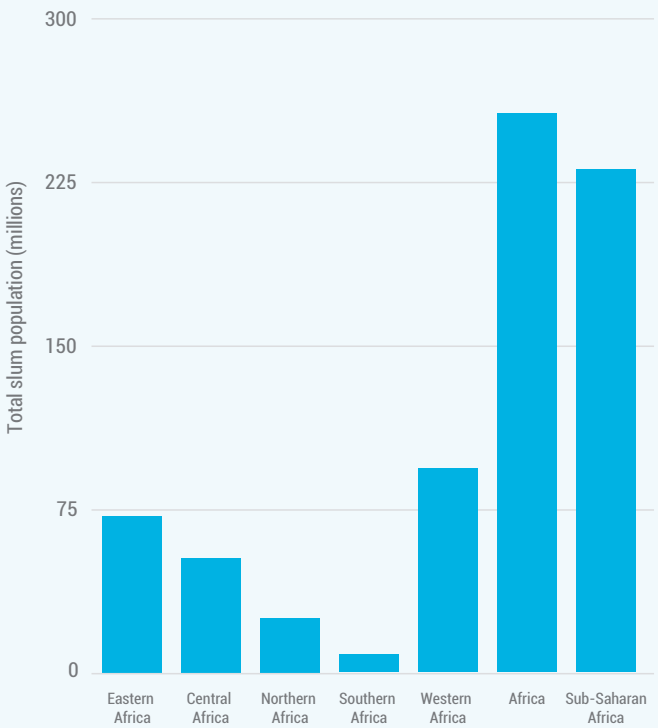
11 UN-Habitat and APA (2013) The state of planning in Africa; https://unhabitat.org/the-state-of-planning-in-africa

12 Foster, Vivien; Briceno-Garmendia, Cecilia. 2010. Africa's Infrastructure: A Time for Transformation. Africa Development Forum. World Bank.

1.2. Prevalence of slums and informal settlements

As deliberated, informality in human settlements is prevalent in the region. In the East and West Africa regions, at least half of the urban population lives in slums or informal settlements. The same is true for about 3 out of 5 urban residents in Central Africa (see Figure 1). In absolute numbers, West Africa has the highest count of slum residents, while Southern Africa has the lowest, 94 million and 11 million people, respectively.

Figure 1. Distribution of slum population in Africa



Data source: Global Urban Indicators Database, UN-Habitat, 2020

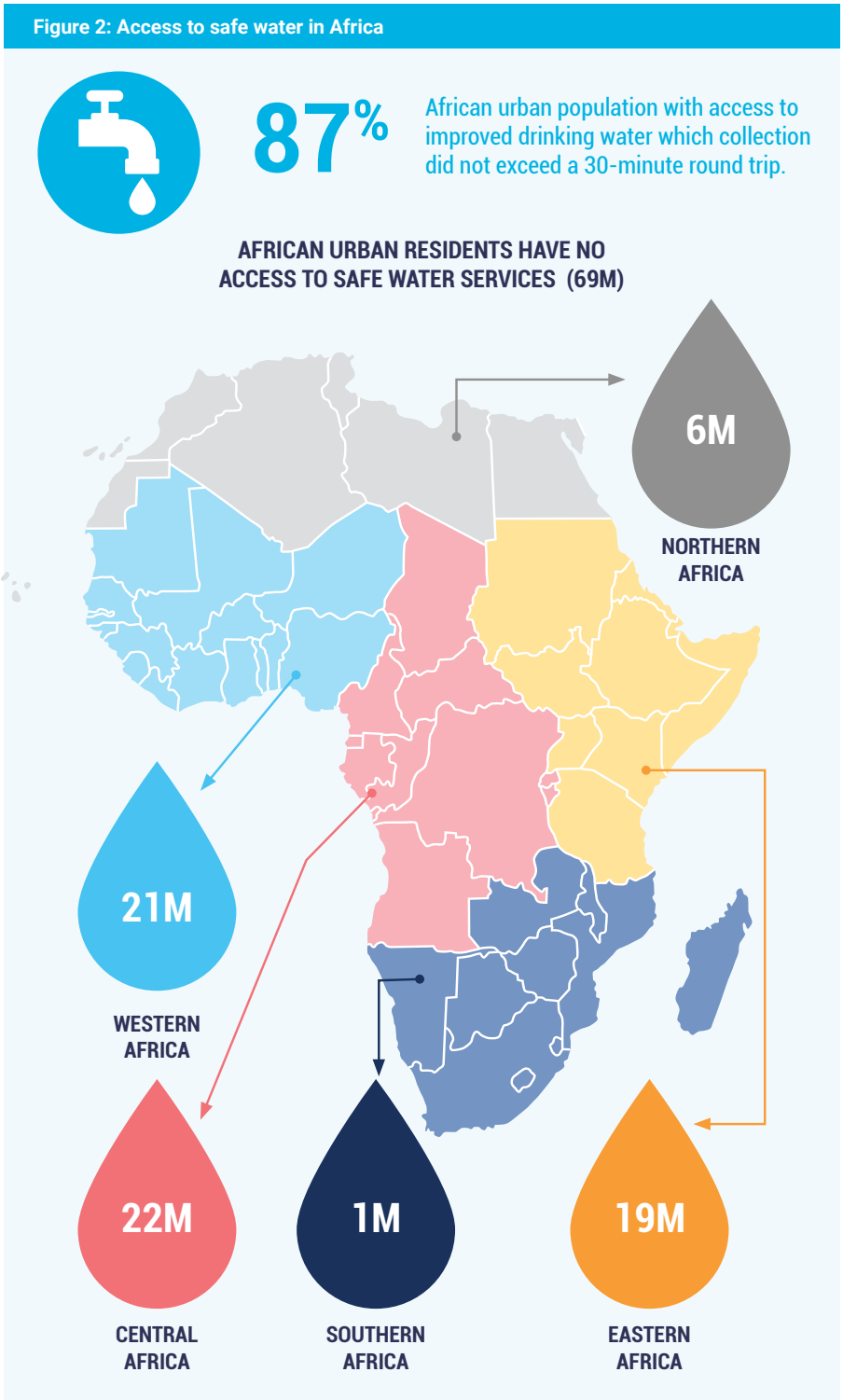
People living in slums and informal settlements are at heightened risk of contracting the COVID19. Whereas social and physical distancing and hand washing are essential precautions against spreading COVID-19, in urban slums where physical space is constrained, rooms are often shared and poorly ventilated, while water and sanitation services are inadequate or absent.

1.3. Access to basic services in urban areas

Access to safe water, sanitation and other hygiene facilities is especially critical to protecting populations during infectious disease outbreaks. Access to clean drinking water is considerably high in African urban areas. In 2017, 87% of the total African urban population had access to improved drinking water which collection did not exceed a 30-minute round trip.[13] There are, however, regional differences, with Southern Africa having the highest level of access (99%) and Central Africa the lowest (73%). In absolute numbers, about 69 million African urban residents have no access to safe water services, most of which are in Central Africa (22 million), West Africa (21 million) and East Africa (19 million).

UN-Habitat's database shows that only 55% of all Africa's urban residents have access to basic sanitation services, (i.e. improved sanitation facilities not shared with other households) 44% in sub-Saharan Africa) and access to hygiene facilities is low in Africa since only 47% of all urban residents have basic hand washing facilities in their homes (37% in sub-Saharan Africa). This presents challenges for preventing the spread of COVID-19 and other infectious diseases.

Figure 2: Access to safe water in Africa



13 UN-Habitat (2020) Urban Indicators Database

1.4. Informal employment, poverty and inequality

Informality, underemployment and the precarious nature of employment affect almost all Africans of working age and most work is self-employment (80% in Africa overall).[14] The informal sector is where 71% of African's work is the mainstay. [15] This poses significant threats to families, exposing them to food and health insecurity. Containment measures such as lockdowns, curfews and mandatory quarantines are extremely difficult to enforce in African cities where most people rely on casual informal work with daily earnings covering critical expenses.

Unlike inhabitants of countries with more advanced economies, informal economy workers in developing nations lack the social protection and support mechanisms if they lose their livelihoods. They have neither safety nets nor alternative incomes and they often lack disposable cash to stockpile food. Many of them need public assistance, in cash or in-kind, to survive. Per a sample survey of five slums in Nairobi conducted on 22 April 2020, 81% of the residents already suffered complete or partial loss of their jobs and incomes due to COVID-19. But people have recurrent expenses for food, energy, water and even in slums the rent still comes due at the end of the month.[16] Risks of housing eviction due to lack of income and consequential rent arrears are thus high. In Africa, the share of people renting their accommodation can be as high as 70% in urban areas.

With nearly half of all Africans still living on less than USD 1.25 a day,[17] poverty is also a dominant feature of the continent's cities. Inequality remains a major challenge with South Africa has the highest level of income inequality in the world. Of the 19 most income unequal countries in the world, 10 are in Africa. Furthermore, inequality is positively correlated with the size of urban settlements, with the larger cities characterized by higher levels of inequality. From an economic development perspective, urbanization yields significantly less value to the GDP in Africa than it does in Asia and the existing GDP growth does not translate into matching improvements in the quality of life. Persistent poverty and inequality also pose challenges for COVID-19 containment and responses given the underlying income and other deprivations.

81%

of slum residents have already suffered complete or partial loss of their jobs and incomes due to COVID-19

Per a sample survey of five slums in Nairobi conducted on 22 April 2020,

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14 Oxfam (2019), A tale of two continents. Fighting inequality in Africa
15 ECA (2020) COVID-19 in Africa: Protecting Lives and Economies
16 https://covid19africawatch.org/urbanization-and-covid19-in-africa/
17 UN (2017) Africa Renewal. Combating Africa's inequalities

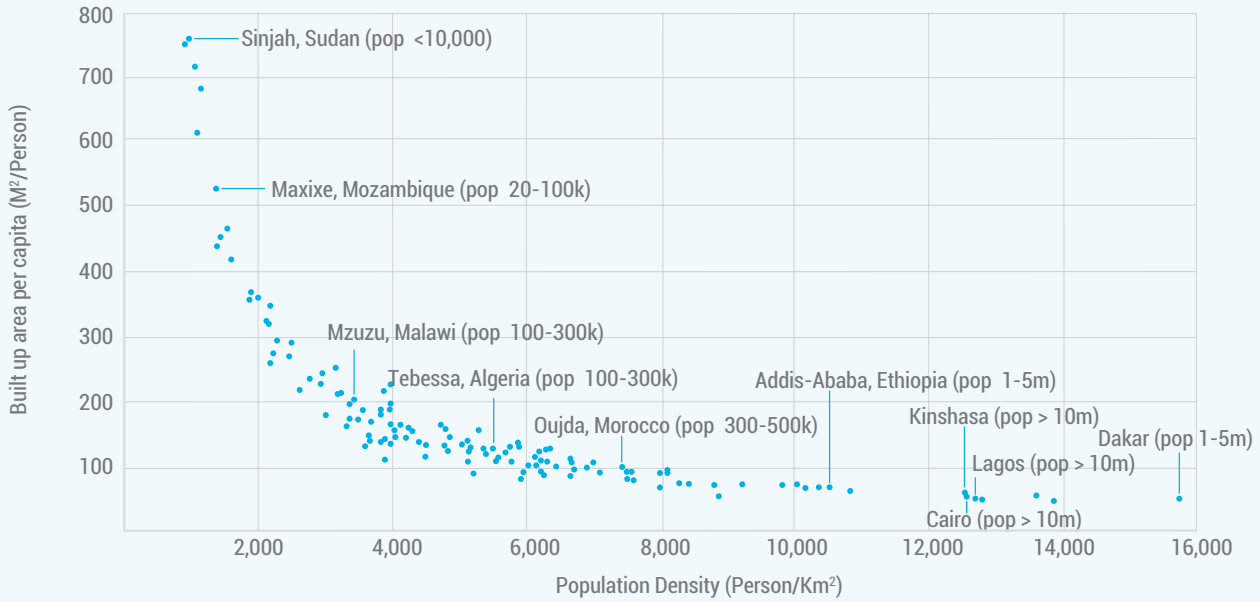
1.5. Density, mobility and market places: Contagion opportunities

Urban areas with populations exceeding 500,000 inhabitants typically experience higher population densities, higher built-up area densities and overcrowding, all of which presenting increased COVID-19 exposure risks. The three largest African cities, Cairo, Kinshasa and Lagos, have population densities in excess of 12,000 people per km^2 but less built-up area per capita at only 54 m^2. On the other hand, a small town like Maxixe in Mozambique, where the population is below 100,000 has a population density averaging about 1,300 persons per km^2 and 528 m^2 of built-up area per capita (see Fig. 2). The lower densities translate into significantly less congestion and lower COVID-19 exposure risk. The prevailing density conditions, as well as the strength of the linkages with infection sources (such as international travel) could explain the current significant variations in reported COVID-19 cases. For example, Lagos accounts for about 42.5% of the total number of cases in Nigeria (2,624 out of 6,175 reported cases as of 19 May 2020) against zero cases in Maxixe in Mozambique.

Despite government efforts to improve mobility in Africa by introducing mass and energy-efficient transport such as the light rail in Addis Ababa, trams in Casablanca, the underground metro in Cairo, Bus Rapid Transport (BRT) in Dar Es Salaam and promoting mass use of bicycles in Ouagadougou, several challenges remain. Urban mobility systems in Africa are fragmented in their coverage, service is poor, road design usually excludes non-motorized modes and pedestrians, and road safety systems have shortfalls. In the absence of high capacity public transport options, mobility in African cities depends on low- to medium-capacity informal services, especially minibuses and motorbikes. At peak hours, these urban public service vehicles are typically overcrowded making social distancing during pandemics impossible.

Urban marketplaces play a key role in the local economy and revenue generation. They are spaces for sociability, meetings, services provision and marketing besides the sale of goods and production. In African cities, open air marketplaces are typically poorly designed and often informal. People use inadequate sanitation, clean water is rare and water storage tanks absent, electricity connections are unreliable, fire safety equipment is lacking, pathways are narrow and there is limited space between sellers. Such overcrowded marketplaces enhance the spread of transmissible diseases.

Figure 3: Distribution of population density and built up area per capita in select cities



Data Source : UN-Habitat Urban Indicators data base, 2020

2. The impacts of COVID-19 on cities

Cities are the engines of national economic development and growth. The productivity in African cities are much higher than in rural areas. Therefore, the COVID-19 lockdowns impacts on African cities are vast. African cities are home to more than 588 million people,but the COVID-19 pandemic is impacting far more, due to the region's strong linkages to rural areas and urban-rural connections.

Although the urban productivity is much higher in Africa, cities' overall economic development level is low as infrastruture is inadequate. The coronavirus pandemic has revealed a series of economic and social ailments in Africa's urban areas. This chapter will examine the economic and social impacts of COVID-19 on African cities.

2.1. Health systems and coping measures

Africa's capacity to effectively contain the pandemic will largely depend on proactive responses and the resilience of its health systems. While the global threshold for health professionals is 23 per 10,000 inhabitants, 13 out of 47 African countries have less than five health professionals per 10,000 of the population.[18] In addition, Africa has lower ratios of hospital beds and intensive care units (ICUs) relative to other regions. On average, Africa has 1.8 hospital beds per 1,000 people, compared to almost 6.0 in France. Also, 94% of Africa's total stock of pharmaceuticals is imported.[19] With increasing restrictions or outright bans on exports of essential COVID-19 supplies, the outbreak of COVID-19 jeopardizes Africa's access to these life-saving medical supplies. Africa's urban dwellers, especially those living in slums and informal settlements, face challenges in accessing healthcare services and products, notably so in the light of the COVID-19 related loss of incomes.

Figure 3: Number of hospital beds per 1000 people

1.8

Number of hospital beds per 1,000 people in Africa

Governments in Africa have identified and diverted financial resources to create additional medical care facilities, including repurposing hotels and other facilities for group confinements. African entrepreneurs and governments have also started their own production of face masks and materials for sanitization to reduce the gaps in supply.

Africa also experienced international and internal private sector donations and interventions in the response to the COVID-19 pandemic. Chinese billionaire and owner of Alibaba, Jack Ma donated 6 million face masks, 1.1 million testing kit and 60,000 protective gears to Africa. In Nigeria, the organized private sector such as Guarantee Trust Bank (GTB) built and transferred Isolation centres equipped with state of the art medical facilities to the Lagos State Government whilst other which included prominent citizens followed with generous donations to both the State and Federal Government purses in combating the pandemic.

18 https://www.who.int/workforcealliance/knowledge/resources/GHWA-a_universal_truth_report.pdf?ua=1

19 https://www.aetnainternational.com/en/about-us/explore/living-abroad/culture-lifestyle/health-care-quality-in-africa.html

2.2. Economic and financial impacts of COVID-19

2.2.1. Contracted growth of urban economies

Africa's cities account for more than 50% of the region's GDP.[20] At the country level, this statistic is even higher for countries such as Botswana, Sudan and Tunisia. As such, the economic contribution of cities in terms of growth, jobs and revenues is far higher in Africa than their share of the national population. Given their centrality in urban development, the economic shock resulting from the COVID-19 pandemic has a cascading impact on cities and their functions and vise-versa.

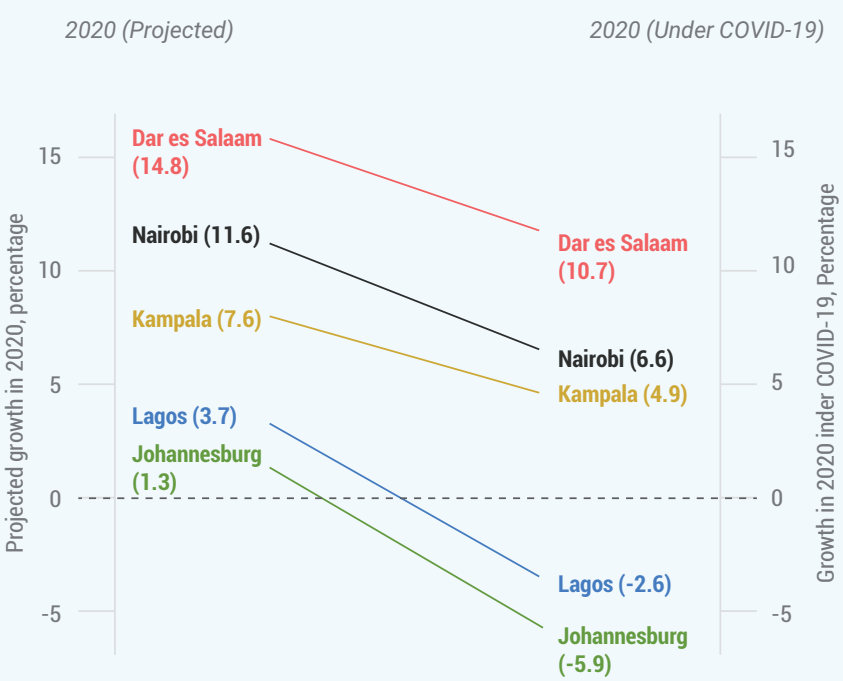
In general, urban economies grow faster due to their concentration of modern and higher productivity sectors, such as manufacturing, services, telecommunications, transport etc. As the main economic hubs in most African countries and associated with higher growth rates than the national average, primary cities will experience pronounced economic impacts due to the lockdown and movement restriction measures. As such, the economic contraction will be more distinct in local economies with a higher share of tradable activities, particularly manufacturing and services, and a higher proportion of the GDP or the GVA (gross value added) contribution of the informal sector, all other factors being equal.

For example, Johannesburg and Lagos, the cities with the highest share of traded sectors -and major gateways for Foreign Direct Investment (FDI) into Africa-, are expected to experience negative growth. Nairobi also has a high share of the traded sector and, as a secondary African access point for FDI, is expected to contract by 5%. The two other cities in the sample will see a decline of 3 to 4%. The urban economic contraction will directly reduce municipal revenues which, in turn, lead to less financial resources to deliver urban services (see Fig. 4).

2.2.2. Major cuts in urban jobs and livelihoods

In March 2020, the ILO projected that COVID-19 could lead to a loss of up to about 25 million jobs in Africa. However, the reality appears more severe and the actual job losses could be significantly higher. Urban-based sectors, particularly manufacturing and services, which currently account for 64% of the African GDP , are expected to be hit hard by COVID-19 with substantial losses of productive jobs.

Figure 4: Projected growth and growth under COVID-19 conditions in selected African primary cities



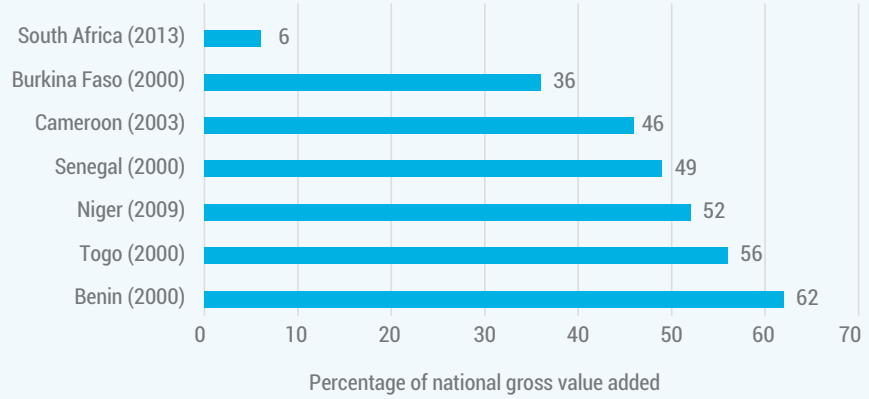
Source: UNCDF computations based on national statistics and IMF growth projections

20 UNECA, 2020

Small and medium-sized enterprises (SMEs), accounting for 80% of total employment, are especially vulnerable to the impact of the pandemic given their limited capacity to financially absorb systemic shocks. Particularly affected are small businesses in trade, hospitality, tourism and manufacturing, where a whopping 90% of businesses expect at least a 10% decrease in their 2020 revenues compared to 2019.[21] 85% of Uganda's SMEs have cash coverage sufficient for three months of operation or less – a situation which is typical across the continent.[22] With the lockdowns in many countries approaching three months, the recovery prospects for these enterprises are shrinking fast as they face decreases in their assets, workers, customers, and market shares.

The informal sector represents between 35% and 50% of the region's added value and between 60% and 80% of employment in Africa. The sector will be hard hit, resulting in loss of income for many (see Figure 4).[23] The risks are compounded by a likely spike in the cost of living due to disruptions in supply chains, threatening the livelihoods and social welfare of millions of Africans who depend on small businesses or the informal sector for their daily survival. Since most of those working in the informal economy are women and girls, particularly in low-paying occupations such as market vendors, where women constitute 70% or more, the disparities between men and women based on social norms and gender stereotypes are likely to worsen. This is also related to increased risk of violence and harassment at work and of stigmatization of certain categories of workers (e.g. immigrants and persons with disabilities).

Figure 5: Contribution of informal sector output to non-agricultural Gross Value Added (GVA)



Source: UNCDF based on Fourie, Frederick. (2018), The South African Informal Sector: Creating Jobs, Reducing Poverty. Cape Town: HSRC Press.

2.2.3. Shrinking local fiscal space

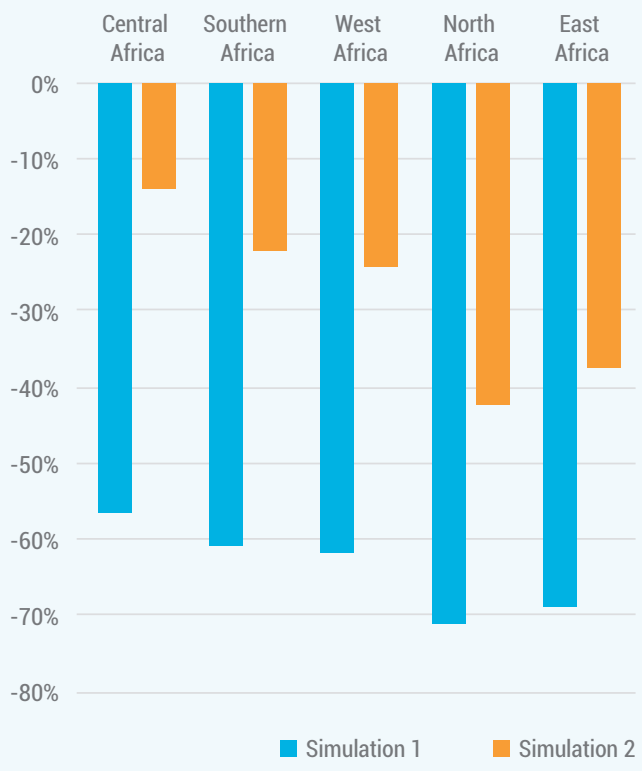
Local governments' fiscal space has three main components: (a) own source revenues, (b) fiscal transfers from higher levels of government, and (c) borrowing. Many economic activities are concentrated in urban areas and constitute a key revenue source of central government. But often the revenue flows to cities are weak. Consequently, underfunded cities are common in Africa and their lack of fiscal space for health crises like the COVID-19 pandemic is exacerbating the crisis. Simulations based on data from the Africa Local Finance Observatory show that African local governments, on the average, are projected to experience a drop in local finances in the order of 65% under the first simulation (worst case scenario) and up to 30% under the second (best case scenario). This suggests that, if current trends continue, local authorities could lose up to two-thirds of their financial resources. However, these averages mask strong regional disparities. Figure 5 shows the projected COVID-19 impact on the finances of local authorities by region: for East Africa USD 51 per capita and North Africa USD 150 per capita. These two regions also show the largest declines in the best-case scenario, assuming that national government subsidies are maintained at the same level. Central Africa (USD 21 per capita) is projected to experiences the smallest declines in both scenarios among the five regions, reflecting a smaller contribution by the informal sector and/or the impact of the many exemptions that formal businesses do benefit from.

21 Stats SA 2020, UNCDF2020a.

22 UNCDF 2020a

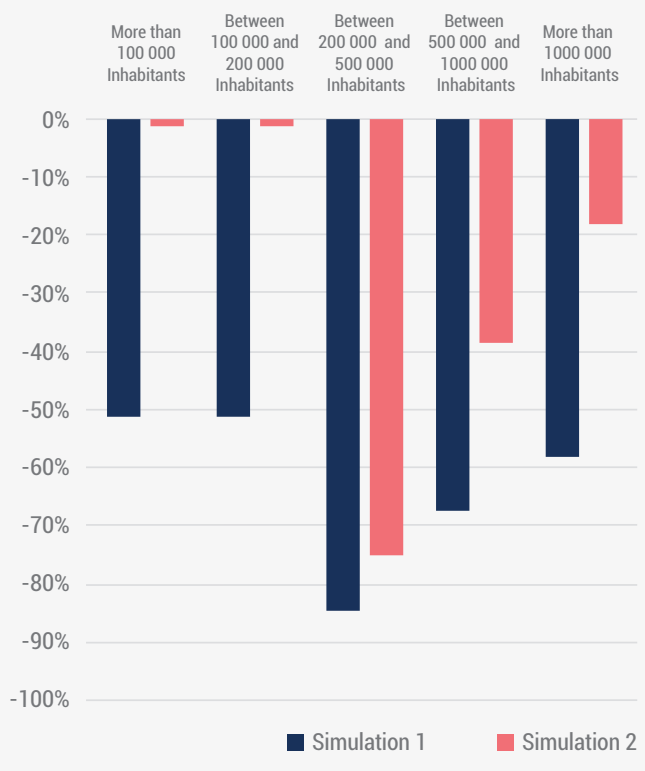
23 See the results of the Ecolog studies.

Figure 6: Average impact on local and regional governments' finances in the five regions of Africa



Source: Data from UCLG, Africa Local Finance Observatory

Figure 7: Impact on the capital investment of local and regional governments per size of population



Source: Data from UCLG Africa Local Finance Observatory

The sources of revenues that will be hit particularly hard include licenses and fees, local service taxes, user fees, property taxes, and other revenues such as for example, municipal property rents and fines. These are expected to decline by about 50%.[24] With some of these revenues are intentionally foregone by local governments as part of a local economy relief package whereas others are dropped precipitously due to diminished economic activity.

The second element is the investment expenditures of local governments (averaging USD 28 per capita) based on central government transfers. The impacts of COVID-19 range from 63%, if the current situation resumes, to 26% for an optimistic scenario. Given the limited investment budgets in normal times, it is necessary for national governments to provide special grants dedicated to investment.

Figure 7 shows that cities with less than 200,000 inhabitants are most impacted. The fact that variations in investment spending in both simulations cover exactly the variation of the number of subsidies from the national government shows that these small cities have no investment capacity. All financial resources are used for the operation of public services.

24 UNCDF 2020b

Small- and medium-sized cities, ranging in size from 0.2 to 0.5 million inhabitants, will experience the largest proportion of decline in financial resources both due to the shrinkage of subsidies and transfers from the national government, and weak own resources.

2.3. Potential impacts on the housing sector

Adequate housing is essential for social distancing and good hygiene practices. The COVID-19 pandemic is therefore hitting hardest those living in informal settlements and the homeless, exacerbating the seriousness of the pre-existing housing crises already affecting millions of people in Africa. As cities restrict movements and suspend daily economic activities, staying at home is not always an option for all. Homeless people are particularly vulnerable to health pandemics and often have pre-existing health conditions.

The impact of COVID-19 on incomes and jobs, particularly for low-income and informal workers, will result in mortgage defaults and rental arrears and may lead to forced evictions. In Kenya, 30.5% of households were unable to pay their rent due to job losses attributable to COVID-19.[25] Governments across Africa seek to protect those most vulnerable to the pandemic. Ghana, Guinea and Gabon have announced that the government will cover the water bills of its citizens, while ensuring stable water and electricity supply. South Africa and

In Kenya,

30.5%

of households were unable to pay their rent due to job losses attributable to COVID-19.

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Kenya are increasing access to water in informal settlements and in rural areas by providing water tanks, standpipes and by placing sanitizers in public spaces. Gabon and Guinea have called for the suspension of rental fees for vulnerable households.

Lack of data on tenants and the management of rents and mortgages constrain housing subsidies planned by some African countries in response to COVID-19. In Gabon, insufficient public information on the subsidy criteria affected the implementation of rental and mortgage payment subsidies, raising the question of lack of transparency. In Guinea, due to lack of reliable data, the government[26] was not able to estimate the total amount required for the rental subsidies indicated in the *National COVID-19 Response Plan*.

The current health crisis however opens prospects for a new type of recovery that focuses on creating a different society. It presents opportunities for the *Decade of Action* to set and reach new milestones in reducing inequality and in poverty levels and to move towards access to adequate housing for all as well as progressively delivering universal human rights everywhere.

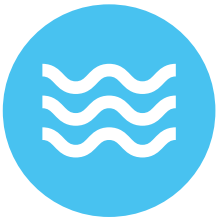
2.4. Observing social and physical distance

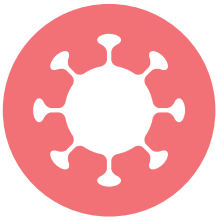
As part of their COVID-19 pandemic response plans, African national and city governments have put in place restrictions on movement and socializing. However, in many locations these restrictions are only partially followed, and flaunting social distancing guidelines is worryingly common. The needs for many urban residents to earn their daily income to pay for rent, food, school fees, hospital bills and other expenses are a clear challenge to enforcing the restrictions on movement and physical proximity.

25 Survey on Socio Economic Impact of COVID-19 on Households Report; https://www.theelephant.info/documents/knbs-survey-on-socio-economic-impact-of-covid-19-on-households-report/

26 Primature (2020) Plan de riposte économique à la crise sanitaire COVID-19, République de Guinée

The COVID-19 pandemic also exacerbates parallel ongoing crises, such as the locust invasion and floods in East Africa, the Boko Haram in Lake Chad region, and insecurity in the Sahel region.





2.5. Food security challenges in cities

The COVID-19 pandemic also exacerbates parallel ongoing crises, such as the locust invasion and floods in East Africa, the Boko Haram violence in the Lake Chad region, and insecurity in the Sahel region. According to the May 2020 update on the COVID-19 epidemic by the Global Humanitarian Response Plan, it is estimated that, in 2019, around 135 million people experienced acute food insecurity and a further 183 million were on the verge of a food crisis, of which some 60% in African countries alone.[27] Global, regional and national food supply chains are disrupted by the current mobility restrictions. Exporters and retailers of food products and sellers of seeds, fertilizers and insecticides, are experiencing decreased activity and income. Restaurant and bar operators also face similar challenges. Landlocked countries are affected by shortages and delays in food imports and declines in revenue generation through the food trade.

The population group mostly affected by COVID-19 restrictions in terms of food security is the urban poor, who are not able to afford bulk buy and store their own food for subsistence. There are three main channels to explain the food restrictions for urban poor. The first channel has been the reduction in household incomes due to the lockdown for those in the informal sector, especially the self-employed with low income sources and no safety net provision. The second channel is the attendant changes in prices of different types of foods resulting from lower supply and leading to scarcity. This is particularly pertinent in countries where health authorities indicated to the general population that fruits and vegetables are key in increasing immunity to COVID-19. Prices of long shelf-life foods also increased due to higher-income households scrambling to purchase and accumulate household buffer stocks as a means of self-insurance against hunger and lockdown uncertainty. The third channel is the fact that all school children and the unemployed youths are at home at the same time on a 24-hour basis. That means an increased reliance on food from the household (and not on school meals) on a 24-hour basis. Lowest income households, where the breadwinners are mostly employed in the informal sector accompanied with daily or weekly wages, have seen a reduction in the number of meals from three per day to one meal or maximum two meals per day.

Many African countries are now providing essential food supply to vulnerable households, targeting mainly urban informal settlements. Those interventions also aim at ensuring that people have access to safety nets, but also seeking to reduce social tensions that could trigger food riots and other security crises. City authorities and local governments and institutions should be supported by their central government in step-by-step and data-driven approaches to helping the vulnerable and in balancing priorities related to surveillance, lives and livelihoods.

27 2020 edition of the Global Report on Food Crises

2.6. Governance and institutional dimensions

2.6.1. Overview of governance

Despite all its challenges, the COVID-19 pandemic also has the potential to transform urban governance. The current health crisis has highlighted the critical role of national governments in responding to emergencies in cities, as well as the equally crucial roles of subnational and local governments in addressing the pandemic locally. COVID-19 has catapulted non-state actors (civil societies, community-and faith-based organizations and the private sector) into prominent roles that underscored the value of societal cooperation. It has also highlighted the importance of coordination and cooperation among different levels of government and sectoral institutions.

2.6.2. Coordination and cooperation among government levels and sectoral institutions

Coordination and cooperation between different levels of government is essential when responding to emergencies and crises. Several African governments have established institutional structures to coordinate actions, both vertically and horizontally, between sectoral institutions and ministries. These structures include taskforces such as Equatorial Guinea's National Coronavirus Surveillance Technical Committee, Ethiopia's National COVID-19 Ministerial Committee, Uganda's Presidential Scientific and Strategic Advisory Committee and COVID-19 Presidential Task Forces in other countries. In South Africa, inter-governmental associations such as the South African Local Government Association (SALGA) have been enlisted to disseminate information, support its member municipalities and advocate for their interests with the national government. Kenya has established collaborative mechanisms between the national and county governments.

2.7. Information Inequality

The challenges posed by the COVID-19 epidemic go beyond the health system. They include restrained mobility, reduced social interaction and generate new forms of information inequality such as, for example, access of students to the Internet, computers or television to attend online classes. In Africa, the Statista[28] group observed that there were nearly 55.3 million TV households in 2015, a number which is expected to rise to almost 75 million by 2021. In East Africa, with a total 2014 population of 146.9 million and with 33.6 million households, the TV penetration rate was a mere 23%.[29] The limited use of the television platform makes a case for the Internet and mobile phones. But Internet users in Africa are still comparatively few with a 39.3% penetration rate. In Nigeria, the largest economy and most populous country in the region, Internet penetration is just 47%[30].

Internet users in Africa are still comparatively few with a

39.3%

penetration rate.

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28 https://www.statista.com/statistics/287739/number-of-tv-households-in-sub-saharan-africa/

29 https://advanced-television.com/2015/04/17/east-africa-tv-penetration-23/

30 https://www.statista.com/statistics/484918/internet-user-reach-nigeria/

2.8 Increased vulnerability of women and girls

As the pandemic hits low- and middle-income countries within the region the hardest, it is critical that the response acknowledges underlying inequalities that place women and girls at even greater risk. The harsh realities of gender inequality are particularly obvious in slums where the population is most at-risk and least prepared.

Most countries have responded to COVID-19 with shelter-in-place orders, lockdowns and measures to curtail the spread. But urban inhabitants, especially slum-dwellers, have a hard time complying, as their overcrowded housing often lacks basic utilities, like water and sanitation. For women and girls who live in slums, the challenges are even greater as they face increased domestic violence (already being reported) and unpaid care burdens.[31]

Women aged 15 to 49 are overrepresented in urban slums and slum-like settings in 80% of the 59 developing countries (UN-Habitat/ UN-Women, 2019).[32] In Kibera, Kenya, the world's fourth-most-populated slum, there are 116 women for every 100 men. The figure is 120+ women per 100 men in Gabon, Ghana, and Lesotho.[33] Women in slums are worse off than their male slum and female non-slum counterparts in access to employment, health facilities, secure housing and education completion. COVID-19 and its aftermath are only expected to worsen such outcomes and increase extreme poverty.[34] Women in slums tend to be in low paid, temporary and exploitative work, making them more likely to be 'working poor' (employed but earning less than USD 1.90 a day). Many are domestic workers who can't render services remotely, thereby losing income that enabled them to feed their families.

Women aged 15 to 49 are overrepresented in urban slums and slum-like settings in

80%

of the 59 developing countries

It is therefore critical that the response acknowledges underlying inequalities that place women at even greater risk. Staying at home, handwashing, maintaining good hygiene and practicing social distancing is advised. However, 1.2 billion urban-dwellers globally lack access to hygiene and handwashing facilities and 2.2 billion urban-dwellers lack access to safely managed sanitation facilities. In the Kibera slum, residents have one latrine for 50 to 150 people.[35]

Ultimately, the worst-affected by the pandemic will be those facing multiple and intersecting deprivations. Women and girls in slums face the double whammy of greater exposure to the virus, given their limited access to hygiene and space, while each day of lost income and education multiplies their vulnerabilities and pushes them further behind.

31 https://www.wider.unu.edu/publication/covid-19-and-lockdowns

32 https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/harsh-realities-marginalized-women-in-cities-of-the-developing-world-en.pdf?la=en&vs=747#page=8

33 https://unhabitat.org/covid-19-exposes-the-harsh-realities-of-gender-inequality-in-slums

34 https://openknowledge.worldbank.org/bitstream/handle/10986/33622/Gender-Dimensions-of-the-COVID-19-Pandemic.pdf

35 https://www.fastcompany.com/90483973/what-will-coronavirus-do-to-one-of-africas-largest-slums

3. Responses in addressing COVID-19

The Risk Communication and Community Engagement (RCCE) task force (2017),[36] reflecting on the Ebola responses by humanitarian actors, observed that urban contexts exhibit high levels of density, diversity, connectivity and change which create complex social dynamics that are constantly changing over time. This is what has also been observed with COVID-19. Responses are of different dimensions, continually adjusted according to the disease's trend, while alleviating the intrinsic economic and fiscal consequences of responding to the demand of neighboring countries to continue trade.

3.1. National responses in brief

In their COVID-19 response plans, most African countries instituted control measures ranging from restrictions on inter-regional movements to total lockdowns at the local, provincial or national level. Some countries, Algeria for instance, established lockdowns on its most highly affected and high-risk areas. Table 1 shows an overview of the interventions by African governments. Almost all African countries formulated response plans and created taskforces to provide policy and strategic guidance to address the pandemic.

Table 1. National measures put in place in Africa

Measures	Country
Border closures and suspension of international flights	Algeria, Angola, Botswana, Burkina Faso, Burundi, Cape Verde, Cameroon, Chad, Congo, Djibouti, DRC, Egypt, Equatorial Guinea, Eritrea, Eswatini, Ethiopia, Gambia, Ghana, Guinea, Guinea-Bissau, Ivory Coast, Kenya, Libya, Madagascar, Mali, Mauritania, Morocco, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone, Somalia, South Africa, South Sudan, Sudan, Togo, Tunisia, Uganda, Zimbabwe
Schools closures	Algeria, Angola, Cameroon, Chad, Djibouti, Egypt, Equatorial Guinea, Eritrea, Ethiopia, Gambia, Ghana, Guinea, Ivory Coast, Kenya, Liberia, Libya, Madagascar, Malawi, Mali, Morocco, Niger, Nigeria, Rwanda, Seychelles, South Sudan, Togo, Tunisia, Uganda, Zambia,
State of emergency declared	DRC, Equatorial Guinea, Ethiopia, Guinea, Guinea-Bissau, Liberia, Libya, Malawi, Morocco, Mozambique, Namibia, Senegal, Sierra Leone, South Africa
Lockdowns (total lock down or lock down of high-risk areas/regions	**Total Lockdowns:** Angola, Botswana, Cape Verde (Boa Vista under quarantine), Congo, Djibouti, Eritrea, Liberia, Malawi, Rwanda, Sierra Leone, Tunisia, Uganda, Zimbabwe. **Partial lockdowns:** Algeria (affecting Blida province); Benin (for 15 cities), DRC (Kinshasa), Gabon (Libreville), Ghana (larger Accra), Namibia (Erongo and Khom as regions), Nigeria (Lagos & Abuja), Sudan (Khartoum),
Restriction of cross-region/ internal movements	Central African Republic, Equatorial Guinea, Eswatini, Guinea, Ivory Coast, Kenya, Mauritius, Mozambique, Namibia, Niger, Nigeria, Senegal, Sierra Leone, South Africa, Sudan,

36 RCCE (2017) Learning from the Ebola Response in cities research, by L. Campbell and L. M. Morel; in https://www.alnap.org/system/files/content/resource/files/main/alnap-urban-2017-ebola-communication-community-engagement.pdf

Ban on group activities and social gatherings	Algeria, Benin, Burkina Faso, Cameroon, Central African Republic, Djibouti, Equatorial Guinea, Eswatini, Gambia, Ghana, Guinea, Ivory Coast, Kenya, Liberia, Libya, Madagascar, Malawi, Mali, Mauritania, Mozambique, Namibia, Niger, Nigeria, Rwanda, Senegal, Seychelles, Somalia, South Sudan, Togo, Tunisia, Uganda, Zambia, Zimbabwe
Night curfews	Algeria, Burkina Faso, Chad (select regions), Congo, Egypt, Guinea, Ivory Coast, Kenya, Libya, Madagascar, Mali, Mauritania, Mauritius, Niger, Senegal, Seychelles, Sierra Leone, Somalia, South Sudan, Sudan, Togo, Uganda,
Mandatory quarantine for inbound travelers	Benin, Burundi, Central African Republic, Eswatini, Kenya, Mozambique, Niger, Tanzania, Tunisia, Zambia,
Compulsory wearing of masks (in entire country or high-risk areas)	**Countrywide:** Cameroon, Djibouti, Equatorial Guinea, Kenya, Liberia, Madagascar, Rwanda. **Masks in high risk areas only:** Benin, Ivory Coast (Abidjan)
Close of all or some non-essential businesses (incl markets, restaurants, bars or markets)	All closed: Cape Verde, Chad, Egypt, Guinea, Guinea-Bissau, Kenya, Sao Tome and Principe, Sierra Leone, South Sudan, Zimbabwe; Restaurants & bars closed: Algeria, Burkina Faso, Gambia, Kenya, Libya
Suspension of public transport or reduced capacity	**Suspension of public transport:** Chad, Djibouti, Eritrea, Guinea-Bissau, Madagascar, Uganda, **Reduction in carrying capacity:** Cameroon, Kenya, Mali,
Economic relief measures for public and businesses (lowered interest rates, tax reductions, bail outs of companies/ institutions, cash disbursements, food distribution, free water and electricity,	Egypt, Gabon, Kenya, Liberia, Mauritania (through WFP), Mauritius, Morocco, Namibia, Nigeria, Rwanda, Senegal, South Africa, Sudan, Togo, Tunisia, Zambia, DRC
Prisoners freed	Ethiopia, Morocco, Nigeria, Tunisia, Cameroon
Emergency fund created	Ethiopia, Gabon, Liberia, Malawi (through WB), Mali, Mauritania (from WB), Morocco, Namibia, Niger (from WB), Nigeria, Rwanda (through IMF), Sao Tome and Principe (through WB), Senegal, South Sudan (through WB), Tunisia, Zambia,
Introduction of new laws or guidelines for enforcement of measures including price controls	Ghana, Liberia, Madagascar, Mali, Nigeria, South Africa,
Direct health sector actions – financial support to ministry of health, health worker recruitments, insurance for frontline workers, personnel equipment, disinfecting of cities, hand washing facilities in public areas	Egypt, Ethiopia, Ghana, Liberia, Burundi (Bujumbura), Kenya, Malawi, Niger, Nigeria, Sao Tome and Principe, Senegal,
Economic measures/cushions (e.g. closure of stock markets)	Mauritius
Rental subsidies to vulnerable households	Gabon, Guinea

Source: African countries' COVID-19 response plans and subsequent measures

3.2. Local and regional governments' responses

3.2.1. Local and city governments: Key players in crisis management

With the ongoing decentralization movement in Africa, the health sector is one of the attribution devolved to local and sub-national governments, altogether with education and hygiene management. Moreover, since urban population densities are very high, especially in slums and other informal settlements, local and sub-national governments are key players in the fight against epidemics and other national disasters.

The main competencies of local and regional governments in crisis management include:

- awareness building through information provision, education and communication;
- implementation of protective measures;
- upgrading of basic health facilities;
- provision of first aid services to the population;
- immediate action to bring relief to the people;
- creation of the enabling conditions for post-disaster resettlement;
- support local economy and business, and
- assistance to the post-disaster reintegration of the affected population sections.

3.2.2. Highlights of measures taken by local and city governments in response to COVID-19

The response from local and sub-national governments to the COVID-19 outbreak was diverse and included conventional measures to control the spread of the disease, implementation of lockdowns and curfews, providing guidance on social distancing and measures aimed at mitigating the social impacts of the pandemic.

The authorities in cities like Abidjan, Johannesburg and Lagos have delivered sanitary and Personal Protective Equipments (PPEs) and preventive supplies (gloves, masks, disposable gowns, bleach, hand washing devices, hospital beds and health equipment) to communities, social workers and health centres. In Sousse, N'Djamena and Rabat the municipality daily sterilizes public spaces to help curb the disease. Faced with the interruption of taxi and bus services, the Kampala Capital City Authority (KCCA) has set up 29 sites with ambulances to provide transportation for people with health emergencies.

In Nairobi, Kinshasa and Niamey, the national authorities, in coordination with local authorities, have opted to isolate some of their epidemic epicentre cities from the remainder of the country to avoid them becoming a national contamination vector. For practical reasons, cargo traffic is exempted but all such vehicles leaving these cities are stopped, checked and each trip must be justified.

COVID-19 has set several challenges in front of local governments but also highlighted their indispensable role in delivering an effective response to the pandemic when provided with adequate means and responsibilities. Yet, their potential has not been fully utilized. In many cases, local governments have not fully assumed the responsibility for addressing the crisis, chiefly acting as the conduits for the central government directives rather than leading the response at the local level by customizing the activities and interventions to the local conditions. Many local governments have displayed commendable initiative trying to engage other partners, mobilize additional finance and expand the scope of their activities beyond what was established by the Centre. But these governments are few, and their initiative attracted inadequate finance and institutional support. COVID-19 offers an opportunity to rethink the role of local governments and test new solutions.

Table 2: Local and city governments' measures in the fight against Covid-19	
Cities	Actions
Nairobi (Kenya) **Kinshasa (DRC) Niamey (Niger)**	Lock down: roadblocks erected; control the comings and goings of the inhabitants; exception of the traffic of cargo.
Information and communication technologies	
Tétouan (Morocco)	Acceleration of the transition to online services
	Definitive end of the use of paper media definitively Switch to digitalization of its services and benefits on behalf of users.
Johannesburg (South Africa)	Assistance in finding and monitoring people who have been potentially exposed
Water	
Harare (Zimbabwe) **Zaire (Angola)**	Increased production of water from 173 mega litres to 240 mega liters per day since April 20, 2020 Access to water for all the suburbs.
Zaire (Angola)	Water tank made available to municipalities
	Supply of drinking water to remote areas of the region as part of the COVID-19 prevention and lockdown measures
Homeless and Migrants	
Fez **(Morocco)**	Identification of a reception site for migrant populations Cleaning of its various outbuildings (dormitories, WCs, kitchens, ….) installation of lampposts Repair of showers with hot water.
	Delivery of conveniences (such as blankets, beds and food, the first supplies)
	Deliveries of food products
Dori (Burkina Faso)	Set up of a communal solidarity fund (to support people who are no longer active following containment measures).
Dakar (Senegal)	Food aid in the19 municipalities of the city
Machakos **(Kenya)**	Exemption from paying water bills between May and December 2020. Access to clean water for everyone

Source: UCLGA (2020) dadabase on COVID-19 response at local governments level

4. Conclusions and recommendations

4.1. Conclusions

The COVID-19 outbreak, according to the World Bank, is predicted to set into motion the first recession in the sub-Saharan Africa region in 25 years, with a growth forecast between -2.1% and -5.1% in 2020, down from a modest 2.4% in 2019.[37] Public debt levels and debt risks are also rising, jeopardizing debt sustainability in some countries.

In most cases, African cities and local governments have been assigned limited responsibilities in addressing the COVID-19 pandemic and may continue to play marginal roles during the post-pandemic socio-economic recovery and reconstruction. Recent risk analysis modeling, undertaken to support decision making on prevention, preparedness, and response measures, and to help predict the likely evolution of the COVID-19 epidemic at the country level, shows that African countries will be the most exposed. The outcomes of two multi-sectoral modeling applications - the OCHA-led COVID-19 Risk Analysis Index[38] and the INFORM[39] COVID-19 Risk Index - indicate that the following countries will be among the top ten in terms of the highest risk index: South Sudan, Central African Republic, Somalia, Burundi, the Democratic Republic of Congo, Chad, Sudan, Burkina Faso, and Malawi.

Considering the economic and fiscal impacts of COVID-19 on national economies and the need to ensure that people have access to adequate food, housing, safe water and sanitation and reliable information, it is becoming clear that there is a need to increase and specify the role of local governments. These authorities are important in advancing community engagement, supporting risk communication and awareness building and facilitating adaptation measures. This can be built on the subsidiary principle without affecting the central role of national government and private, bilateral or multilateral partners.

COVID-19 has shown that it is important to rehabilitate the function of stabilization and redistribution of financial transfers from national to local and regional governments. Subsidy systems for territories must particularly support local governments in their role of accelerating local economic development, so that the growth of local economies will support the creation and redistribution of wealth at the national level. Countercyclical subsidy systems for local governments are more necessary than ever, especially in Africa where the opening of economies to globalization leads to great sensitivity of public finances to cyclical fluctuations in world markets. Strengthening local economies is one of the most effective responses to reducing the sensitivity of national economies to pandemics like COVID-19 and to the cycles of the global economy.

4.2. Policy Recommendations

COVID-19 has revealed the high vulnerability of African cities to the effects of shocks, and their limited capacity to mitigate and recover from the associated impacts. Africa's cities continue to grow rapidly under conditions of severe infrastructure and service deficits, absence of adequate productive jobs, weak planning and management capacities and institutions, among others. Informality, poverty and inequality persist as a manifestation of the underlying structural constraints of Africa's urbanization. Under these conditions, and without deliberate policy responses and adequate investments, cities may well become liabilities for inclusive and resilient future growth and transformation. While COVID-19 presents many challenges in African cities, it also offers considerable opportunities to redefine and reinvigorate efforts to better plan and manage urbanization. Addressing the root causes of unplanned, under-financed,

37 https://www.worldbank.org/en/region/afr/overview

38 Contact: OCHA Humanitarian Financing Strategy and Analysis Unit (ocha-hfrmd-hfsa@un.org). Sources of information for the indicators include DESA, INFORM, Journal of American College of Cardiology, Open Street Map, UNDP, UNESCO, UNHCR, UNICEF, UN-STATS, WHO, WFP/IPC, and the World Bank.

39 INFORM is a multi-stakeholder forum for developing shared, quantitative analysis relevant to humanitarian crises and disasters. INFORM includes organizations from the humanitarian and development sectors, donors, and technical partners. The Joint Research Centre of European Commission is INFORM scientific and technical lead.

and uncoordinated urban dynamics in Africa is now more important than ever. The role of cities and local governments is central in this regard given their focal role across response, recovery and rebuilding efforts.

To adequately address the challenges of COVID-19 on an urban scale and through local governments, five key recommendations have been identified with proposed short, medium- and long-term interventions led by national governments with the support of the African Union and regional communities to address each of them.

4.2.1. Apply local communication and community engagement strategies

- Support the production and implementation of local COVID-19 and urban health management communication strategies.
- Implement urban and local strategies to improve multi-stakeholder community engagement in COVID-19 prevention and management measures.
- Map and update data on vulnerable groups to ensure evidence-based support to exposed households including through community-based approaches.
- Establish integrated urban and local area data management systems to monitor and measure human development and risk indices to facilitate evidence-based decision-making.

4.2.2. Support SMEs and the informal economy

- Provide financial support to key sectors of the economy while availing revenue incentives such as tax holidays and levy reductions, providing liquidity, and reducing interest rates.
- In the short term, where applicable, reduce or waive fees on key services delivery such as water, energy, public transport, sanitation and public toilets access.
- Provide loans with moratorium for SMEs to enhance productivity and avoid layoffs of employee.
- Provide short-term financial bailouts and exemptions for SMEs to limit declines in productivity and employment.
- Provide social protection for those in informal urban employment, while pursuing labor-intensive and public work programs for job creation in the medium term.

4.2.3. Deepen decentralized responses to COVID-19 through strengthened local government capacities

- Support cities and local governments to develop participatory COVID-19 responses, recovery and reconstruction plans linked to national strategies.
- Establish local mechanisms for early detection and prevention of violence against women and children.
- Encourage partnerships between the Public sector, Private sector, Community Based Organizations and Local Authorities for a holistic response to COVID-19 impacts.
- Repurpose and retrofit public spaces, facilities, transport hubs and marketplaces to facilitate COVID-19 prevention and management.
- Support the establishment of local e-governance and related capacity systems for efficiency of services delivery and administration (ICT, access to information, education and connectivity)
- Integrate into national stimulus package subsidies, lump-sum transfers and direct injection of financial resources into local economies to protect fiscal space and aid local economic recovery.
- Carry out disaggregated spatial analysis of COVID 19 impacts and responses at all levels (national, sub-regional and local).
- Assess financial capability and capacity of local governments to develop new plan for strengthening local financial revenues.

4.2.4. Target informal settlements through tailored measures

- Provide COVID-19 tailored health care services to informal settlements taking into consideration unique and elevated vulnerability (water, sanitation, waste management).
- Establish participatory data collection systems in informal settlements to identify gaps and facilitate coordination of interventions among various actors (community, local, national).
- Study the gender and urban poor profiles in slums and

informal settlements and reflect in emergency, recovery and development responses, including women and girls, migrants, people with disability etc.

- Through participatory planning approach, design of a basic street layout to improve the connectivity within the neighborhood to create "minimum distancing" between the different parts of the targeted informal settlement and to lay down the main infrastructure (water pipes, electricity network, etc.).
- Promote urban agriculture in suitable sites, as well as rotational systems to access marketplaces to avoid overcrowding and access to key basic services (water, sanitation, waste management, energy).
- Develop informal settlement regeneration and restructuration plans to be integrated into national priorities and strategies to address root causes of vulnerability.

4.2.5. Establish mechanisms to promote rapid access to housing and prevent forced evictions

- Provide temporary and emergency accommodation for COVID-19 positive individuals by leveraging the use of underutilized spaces and repurposing of buildings to increase the supply of shelter;
- Introduce measures to secure the right to housing for all through moratoriums on evictions and suspension of utility costs and surcharges in the extent possible for the duration of the pandemic.
- Fill the gap on housing data in collaboration with national statistical offices (housing profile, data on tenure system, rental housing, financing and land availability); and revision of housing policies and strategies in the medium term.

4.2.6. Integrate urban planning and management as key priorities for recovery and rebuilding strategies towards long-term resilience

- Data collection on the urban fabric through a city profiling exercise to assess impact of COVID 19 and integrate urban planning and management priorities into national recovery and stimulus packages.
- Address the structural and underlying drivers of urban vulnerability to shocks and stress including through investments in infrastructure, services and job creation for resilience.
- Integrate urbanization and local governance as critical factors for national and economic recovery and resilience drawing on lessons from COVID-19; and adaptation of National Urban Policies to the new context.
- Integrate health dimension into spatial planning process and mechanisms, especially in secondary cities and enhance the competencies of urban planners, local authorities and national development planners for integrating health in urban planning and management;
- Promote green recovery and rebuilding including through developing infrastructures to diversify safe and green mobility through mass public transit and non-motorized transport systems, as well as expanding green jobs in cities.

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the latest ECA report on lockdown exit strategies can be found at: https://www.uneca.org/sites/default/files/PublicationFiles/ecarprt_covidexitstrategis_eng_9may.pdf

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